PAGE 1 / 10

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORW 3X	For	Other	Than An A	uthorized	d Commi	ttee		Office U	Jse Only	
NAME OF COMMITTEE (in		E OR PI	RINT ▼		ample: If ty er the lines		12FI	E4M5		
BLUEGRASS	СОММІТТЕ	EE,		1 1 1 1	1 1 1	1 1 1 1 1	1 1 1		1 1 1	.
	22	28 S WA	SHINGTON S	 Т						
ADDRESS (number and ▼	,	TE 115								
Check if difference than previous reported. (AC	erent L	LEXAND	DRIA				VA	2231	4-5404	
2. FEC IDENTIFICA	ATION NUMB	ER ▼		CITY A			STATE 4	\	ZIP COE	DE 🛦
C C00235655	5		3.	IS THIS REPORT	×	NEW (N) OR		AMENDED (A)		
4. TYPE OF REP (Choose One)	ORT (b) Montl Repo	rt On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5		Aug 20 (M8) Sep 20 (M9)	×	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Rep	orts:			Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)	H	(Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly	Report (Q1)	(-)								
July 15	Report (Q2)		12-Day PRE-Election Report for the	. U	Primary (1 Convention			neral (12G) ecial (12S)	Ш	Runoff (12R)
October Quarterly	15 Report (Q3)		rioport for the	ш	Convontion	(120)	Sp.	00141 (120)		
January Year-End	31 Report (YE)		Ele	ection on	M = M	/ D D /	Y	Y	in the State of	
Year Onl	Non-election y) (MY)		30-Day POST -Election Report for the		General (3	80G)	Ru	noff (30R)		Special (30S)
Terminati (TER)	on Report		Ele	ection on	M = M	/ D = D /	Y	Y	in the State of	
5. Covering Period	10	01	202	23	through	10	/ D		23	
I certify that I have ex		•		-	wledge an	d belief it is t	rue, corre	ct and comple	te.	
Type or Print Name of	Treasurer	DIEINDE	RG, LARRY, ,	,						
Signature of Treasurer	STEINBEI	RG, LARR	PY, , ,				Date	M M / D		2023
NOTE: Submission of fa	alse, erroneous,	, or inco	mplete informa	ation may sı	ubject the p	erson signing	this Repo	rt to the penalt	ies of 52	U.S.C. § 30109
Office Use									FORI Rev. 05/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

BLUEGRASS	COMMITTEE
-----------	-----------

Report Covering the Period: From: MMM / D1 / 2023 To: MMM / D1 / 2023

		COLUMN A This Period	COLUMN B Calendar Year-to-Date					
6.	(a) Cash on Hand January 1, 2023		386798.08					
	(b) Cash on Hand at Beginning of Reporting Period	199089.82						
	(c) Total Receipts (from Line 19)	20007.63	359424.71					
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	219097.45	746222.79					
7.	Total Disbursements (from Line 31)	25952.93	553078.27					
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	193144.52	193144.52					
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00						
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00						

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

BLUEGRASS COMMITTEE

01 10 2023 31 2023 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 15000.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 15000.00 0.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 20000.00 319500.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 334500.00 20000.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 24850.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.01 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 74.70 (Dividends, Interest, etc.)..... 7.63 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 359424.71 12, 13, 14, 15, 16, 17, and 18(c))....... 20007.63 20. Total Federal Receipts 20007.63 359424.71 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		I. Disbursements COLUMN A Total This Period		
21. Operating Expenditures:		Total This Period	Calendar Year-to-Date	
(a) Allocated Federa Activity (from Sc				
	are	0.00	0.00	
(.)				
(ii) Non-Federa	Share	0.00	0.00	
(b) Other Federal O	perating			
·		21752.93	238678.27	
(c) Total Operating I		04750.00	220670.27	
	(ii), and (b))▶	21752.93	238678.27	
Transfers to Affiliated Committees	•	0.00	0.00	
3. Contributions to		3.00	4 4	
Federal Candidates/C and Other Political C	Committees	0.00	285000.00	
. Independent Expendi		4 4	4 4	
(use Schedule E)		0.00	0.00	
 Coordinated Party Ex (52 U.S.C. § 30116(c) 		4 4	4 4	
(use Schedule F)	"	0.00	0.00	
	H			
6. Loan Repayments Ma	ade	0.00	0.00	
			0.00	
 Loans Made Refunds of Contributi 	ons To:	0.00	0.00	
(a) Individuals/Perso	ns Other			
Than Political Co	ommittees	0.00	0.00	
(b) Political Party Co	ommittees	0.00	0.00	
(c) Other Political C		0.00	0.00	
· /		0.00	0.00	
(d) Total Contribution			7 7 7	
` '	, (b), and (c))	0.00	0.00	
(()	, (2),	0.00	0.00	
Other Disbursements	(Including			
Non-Federal Donation	s)	4200.00	29400.00	
		4 4	4 4	
	vity (52 U.S.C. § 30101(20))			
(a) Allocated Federa	-			
(from Schedule I	9	0.00	0.00	
(i) i ederal Share	·······	0.00	0.00	
(ii) "Levin" Share)	0.00	0.00	
(b) Federal Election		4	4 4	
, ,	deral Funds	0.00	0.00	
	ection Activity (add	7 7 7	4 4	
Lines 30(a)(i), 30	O(a)(ii) and 30(b))	0.00	0.00	
		7 7 7	4 4	
Total Disbursements	(add Lines 21(c), 22,			
23, 24, 25, 26, 27, 2		25952.93	553078.27	
		7 2502.00	7 7 7	
. Total Federal Disburs				
(subtract Line 21(a)(ii				
trom Line 31)		25952.93	553078.27	

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	20000.00	334500.00	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20000.00	334500.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	21752.93	238678.27	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.01	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	21752.93	238678.26	

SCHED	JLE A (FEC Form 3X)		Use separate schedule(s)		LINE			₹:	PAGE	6 OF	10				
TFMI7F	D RECEIPTS		for each category of the	(ched	ck only	on on	ie)	_	_						
. LIVIIZL	.D NEGEN 10		Detailed Summary Page		11a		11b	X	11c	12					
				\Box	13		14		15	16	17				
	ation copied from such Reports and Stanercial purposes, other than using the														
NAME C	OF COMMITTEE (In Full)														
	GRASS COMMITTEE														
	ne of Individual (Last, First, Middle Initia ANCE HEALTH PAC	al) or Full O	Organization Name	D	ate of	Re	ceipt								
Mailing A	Address 120 MONUMENT CIR			一 [M M M	1	13	_		2023	Y				
City		State	Zip Code		Trans	acti	on ID	: A0	C556D88	EB8574	3A4A5C				
INDIAN	APOLIS	IN	46204-4906	Α	mount	of	Each	Rec	eipt this	Period					
	number of contributing solitical committee.	C coo	0197228	Amount of Each Receipt this Period 5000.00											
Name of	Employer (for Individual)	upation (for Individual)	[Me	emo	Item									
Receipt	For:	Aggragata	Voor to Dato ▼	\dashv											
	mary General	Aggregate	Year-to-Date ▼												
Ot	her (specify) ▼	' '	5000.00												
			7 7 7												
Full Nam 3. GENE	ne of Individual (Last, First, Middle Initia N PAC	al) or Full O	rganization Name	D	ate of	Re	ceipt								
Mailing A	Address 1399 NEW YORK AVENUE, NV	V			M = M		D .	D	/ Y	Y Y '	ſ				
	SUITE 300				10		23	3	2	2023					
City		State	Zip Code		Transa	acti	on ID	: AA	2BD260	2410304	9B7A9D				
WASHIN	IGTON	DC	20005-4769	A	mount	of	Each	Rec	eipt this	Period					
FEC ID	number of contributing			1.0		-	-	_		5000.0					
federal p	political committee.	C c00	0199257				_		7	5000.0	J				
Name of	Employer (for Individual)	Оссі	upation (for Individual)	- [Me	emo	Item								
Receipt	For														
	mary General	Aggregate	Year-to-Date ▼	.											
	her (specify) ▼		5000.00												
	(opeany) v														
	ne of Individual (Last, First, Middle Initia GOOD GOVERNMENT FUND	al) or Full O	organization Name	D	ate of	Re	ceint								
Mailing A	Address ONE PARK PLAZA			1 -	M = M		D =	D	/	Y	Y				
•	P.O. BOX 550				10	Ľ	19			2023					
City		State	Zip Code	7 -	Trans	acti	on ID	: A8	311C38C	97EB64	117ACD				
NASHV	ILLE	TN	37202	A	mount	of	Each	Rec	eipt this	Period					
	number of contributing political committee.	C cod	0067231				,	_	,	5000.0	0				
Name of	Employer (for Individual)	Оссі	upation (for Individual)	7 [Me	emo	Item								
	For: mary General her (specify)	Aggregate	Year-to-Date ▼ 5000.00												
SUBTOTA	L of Receipts This Page (optional)		>				,		,	15000.00					

TOTAL This Period (last page this line number only).....

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 7 OF 10 (check only one)
			Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
	ny information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	BLUEGRASS COMMITTEE			
Α.	Full Name of Individual (Last, First, Middle Initi REALTORS POLITICAL ACTION COMMI		Organization Name	Date of Receipt
	Mailing Address 430 N. MICHIGAN AVENUE			10 19 2023
	City	State	Zip Code	Transaction ID : ADAF7591DD1E84B5FA19
	CHICAGO	IL	60611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C Co	0030718	5000.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	Aggregate		1
	Other (specify) ▼		5000.00	
_	Full Name of Individual (Lock First Middle Inti	:-I\ FII C	N	
В.	Full Name of Individual (Last, First, Middle Initi	iai) or Full C	organization Name	Date of Receipt
٥.	Mailing Address			M M / D D / Y Y Y Y
	City	State	Zip Code	
				Amount of Each Receipt this Period
	FEC ID number of contributing	С		
	federal political committee.			4 4
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		<u> </u>	
С .	Full Name of Individual (Last, First, Middle Initial	ial) or Full C	Organization Name	Date of Receipt
٠.	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	
	FEO ID south as of a satisfaction			Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	15 0		1
	Other (specify)		g- 1 g- 1 g- 1	1
Г				
s	SUBTOTAL of Receipts This Page (optional)			5000.00

TOTAL This Period (last page this line number only).....

20000.00

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S	CHEDULE B (FEC Form 3X)	T	FOR LIN					E NUMBER: PAGE 8 OF 10									
ΙT	EMIZED DISBURSEMENTS	ZED DISBURSEMENTS Use separate schedule(s) (check of the separate schedule)		•	nly one)												
			Summary Page		X 2	1b 8a		22 28b	-	23 28c	-		26 29		27 30b		
Δ.	ny information copied from such Barasta and Clater	monto massi	ant ha sold == ···-	J					<u> </u>							ıti o -	
	ny information copied from such Reports and States for commercial purposes, other than using the nar																
\setminus	NAME OF COMMITTEE (In Full)		- ·														
$ \rangle$	BLUEGRASS COMMITTEE																
\angle																	
Α.	Full Name (Last, First, Middle Initial)								Date of Disbursement								
	ADP									M M / D D / Y Y Y Y							1
	Mailing Address 1 ADP BLVD						L	10			06	╛		20	023		
	City	State	Zip Code			+											
	ROSELAND	NJ	07068-1728				FE	C Id	denti	fication	on	Nur	nber				
	Purpose of Disbursement			-	_		C	;									
	PAYROLL SERVICE			L.				-	ans	actio	n I	D : I	3705	DAC)AB/		
	Candidate Name			Cate			An	nour	nt of	Each	n E	Disb	ursen	nent	this	Peri	iod
	Office Sought: House Disburse	ment For:		Ту	рe	\dashv	Г				П				134.	98	
	Senate	Primary	General					_		7	۰	+	7	-		_	
	President	Other (spec	cify) ▼					М	emo	Item							
_	State: District:					_		_									
В.	Full Name (Last, First, Middle Initial)						Da	ate c	of Di	sburs	en	nent					
٥.	BALLINGER, KALEIGH, , ,									D				ı v	■ Y	■ Y	
	Mailing Address PO BOX 1496						10 30 2023										
			1														
	City LOUISVILLE	State Zip Code KY 40201-1496						FEC Identification Number									
	Purpose of Disbursement	40201-1430			\exists	C											
	ADMINISTRATIVE CONSULTING		001					Transaction ID : B4BD73DBB3									
	Candidate Name	Category/					Amount of Each Disbursement this Period						iod				
	Office Sought: House Disburse	ment For:		Ту	ре	\dashv	Г		_	-	T	7	-		1000.	00	
	Senate Disburse	ment For: Primary	General				Ш	-	-	7	-	-	7	_	.000.	55	
	President	Other (spec							omo	Itom							
	State: District:							IVI	e1110	Item							
_	Full Name (Last, First, Middle Initial)																
C.	CAVALRY LLC									sburs							
	Mailing Address 425 MASSACHUSETTS AVE NW					\dashv	N	10	1	_	02		Y		023	Y	
	APT 1119																
	,	State	Zip Code			FEC Identification Number											
	WASHINGTON Purpose of Disbursement	DC	20001-7635	C C					_		_	_					
	STRATEGIC CONSULTING			001				-	ane	actio	n I	D·	Rane	980	047E		
	Candidate Name			Cate	gory/		An			Each						Peri	iod
	Office County			Ту		_		-	-	-	÷	-	-	1/	0000	00	
	Office Sought: House Disburse Senate	ment For:						10000					JUUU.	00			
	President	Primary General Other (specify) ▼				П.,											
	State: District:	- (-1-0	, .				Memo Item										
Г	<u> </u>						Т	-	-	-	-	-	-		-		一
s	SUBTOTAL of Disbursements This Page (optional)				>	•	L			7			_	_ 1	1134	.98	
ļ ,	OTAL This Paying (last page this line number sale)	١				_		Т						Т			П
1 1	OTAL This Period (last page this line number only)				•											. 1

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	E NUMBER: PAGE 9 OF 10							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b							
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)	, ,									
BLUEGRASS COMMITTEE										
Full Name (Last, First, Middle Initial)			Date of Disbursement							
A. HANEY CONSULTING			M M / D D / Y Y Y Y							
Mailing Address 616 S ADAMS ST			10 30 2023							
ARLINGTON	State Zip Code VA 22204-2113		FEC Identification Number							
Purpose of Disbursement FUNDRAISING CONSULTING			C							
Candidate Name		Category/	Transaction ID : BA08BB4A79 Amount of Each Disbursement this Period							
		Type								
Office Sought: House Disburser Senate			10000.00							
	Primary ☐ General Other (specify) ▼		Memo Item							
Full Name (Last, First, Middle Initial)										
B. HOLTZMAN VOGEL JOSEFIAK TO	ORCHINSKY PLLC		Date of Disbursement							
Mailing Address 1010 WISCONSIN AVE NW STE 530			10 02 2023							
,	State Zip Code DC 20007-3788		FEC Identification Number							
Purpose of Disbursement	2550, 5150		C							
LEGAL FEES		001	Transaction ID : B70A0C80883							
Candidate Name		Category/ Type	Amount of Each Disbursement this Period							
Office Sought: House Disbursem	nent For:	туре	600.00							
	Primary General									
President State: District:	Other (specify)		Memo Item							
Full Name (Last, First, Middle Initial) C.			Date of Disbursement							
			M M / D D / Y Y Y Y							
Mailing Address										
City	State Zip Code		FEC Identification Number							
Purpose of Disbursement		· · · ·	C							
Candidate Name	Category/ Type	Amount of Each Disbursement this Period								
Office Sought: House Disbursem			7 1 7 1 7							
	Primary General									
State: District:	Other (specify) ▼		Memo Item							
SUBTOTAL of Disbursements This Page (optional)		······	10600.00							
TOTAL This Period (last page this line number only).			21734.98							

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	a.ia dadiooo e. a.i, peniisa.		
BLUEGRASS COMMITTEE			
Full Name (Last, First, Middle Initial)		I	
^{A.} KYLE WHALEN FOR STATE REPR	ESENTATIVE		Date of Disbursement
Mailing Address 1196 TABORLAKE DR			10 17 2023
City LEXINGTON	State Zip Code KY 40502-6593		FEC Identification Number
Purpose of Disbursement			C
NONFEDERAL CONTRIBUTION			
Candidate Name	, i	Category/ Type	Transaction ID: B80A70E827! Amount of Each Disbursement this Period
	nent For: 2023	туре	2100.00
President	Primary General Other (specify) ▼		Memo Item
State: District:	ANNUAL		
Full Name (Last, First, Middle Initial) 3. ROBERT STIVERS FOR STATE S	SENATE		Date of Disbursement
ROBERT STIVERS FOR STATE S	DENATE		M M / D D / Y Y Y Y
Mailing Address 207 MAIN STREET			10 23 2023
City	State Zip Code		FEC Identification Number
MANCHESTER	KY 40962-1259		
Purpose of Disbursement		040	
NONFEDERAL CONTRIBUTION		012	Transaction ID : B99E14A401/
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For: 2023		2100.00
	Primary General		, , , , , , , , , , , , , , , , , , , ,
State: District:	Other (specify) ANNUAL		Memo Item
Full Name (Last, First, Middle Initial)			Date of Dishusanasat
.			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
City	State Zip Code		FEC Identification Number
Purpose of Disbursement			C
Candidate Name	l	Category/	Amount of Each Disbursement this Period
Office County		Type	Amount of Each Biobardonicht this Foriou
Office Sought: House Disbursen			
Senate President	Primary General Other (specify) ▼		
State: District:	outer (specify) ▼		Memo Item
State. Blothet.			
SUBTOTAL of Disbursements This Page (optional)		······	4200.00
			4200.00
TOTAL This Period (last page this line number only)			4200.00